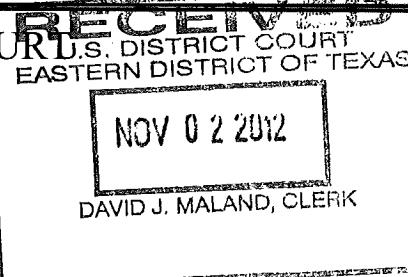


Case 6:12-cv-00576-LED Document 11 Filed 09/27/12 Page 1 of 2 PageID #: 120

AO 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT
for the
Eastern District of Texas



Blue Spike, LLC

Plaintiff(s)

v.

Audible Magic Corporation, et al

Defendant(s)

6:12CV499 LEAD

CONSOLIDATED WITH

Civil Action No. 6:12-CV-576-LED

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) Audible Magic Corporation
CAL Title-Search, Inc.
1005 12th Avenue, Suite E
Sacramento, California 95814

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Eric M. Albritton

ALBRITTON LAW FIRM
P.O. Box 2649
Longview, Texas 75606

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 9/27/12

CLERK OF COURT

Signature of Clerk or Deputy Clerk

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 6:12-CV-576-LED

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* Audible Magic Corporation
was received by me on *(date)* 10/01/2012.

I personally served the summons on the individual at *(place)* _____
on *(date)* _____; or

I left the summons at the individual's residence or usual place of abode with *(name)* _____
, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
on *(date)* _____; or

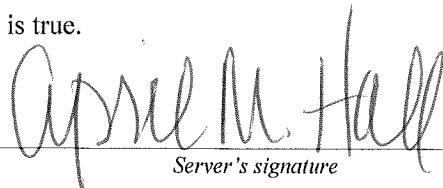
I returned the summons unexecuted because _____; or

Other *(specify)*: Certified Mail, Return Receipt Requested #70080500000118062095

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 10/26/2012



Server's signature

April M. Hall

Printed name and title

111 West Tyler Longview, Tx. 75601

Server's address

Additional information regarding attempted service, etc:



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY							
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <i>D. Oli</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>							
<p>1. Article Addressed to:</p> <p style="background-color: #e0e0e0; padding: 10px; margin: 10px 0;"> Audible Magic Corporation CAL Title-Search, Inc. 1005 12th Avenue, Suite E Sacramento, California 95814 </p>		<p>3. Service Type</p> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Certified Mail</td> <td style="width: 50%;"><input type="checkbox"/> Express Mail</td> </tr> <tr> <td><input type="checkbox"/> Registered</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td><input type="checkbox"/> C.O.D.</td> </tr> </table> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>		<input type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail	<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
<input type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail								
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise								
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.								
<p>2. Article Number (Transfer from service label)</p>		7008 0500 0001 1806 2095 <i>RR</i> 102595-02-M-1540							

PS Form 3811, February 2004

Domestic Return Receipt

English

Customer

USPS Mobile

Register / Sign In

Service



Search USPS.com or Track Packaç

Quick Tools

Ship a Package

Send Mail

Manage Your Mail

Shop

Business Solutions

Track & Confirm

GET EMAIL UPDATES

PRINT DETAILS

YOUR LABEL NUMBER	SERVICE	STATUS OF YOUR ITEM	DATE & TIME	LOCATION	FEATURES
7008050000118062095	Priority Mail®	Delivered	October 01, 2012, 11:22 am	SACRAMENTO, CA 95814	Expected Delivery By: October 1, 2012 Certified Mail™ Return Receipt
		Dispatched to Sort Facility	September 28, 2012, 5:48 pm	LONGVIEW, TX 75601	
		Acceptance	September 28, 2012, 4:19 pm	LONGVIEW, TX 75601	

Check on Another Item

What's your label (or receipt) number?



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